

108TH CONGRESS  
1ST SESSION

# S. 883

To amend title XIX of the Social Security Act to revise and simplify the transitional medical assistance (TMA) program.

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## IN THE SENATE OF THE UNITED STATES

APRIL 10, 2003

Mr. BREAU (for himself, Mr. CHAFEE, Mr. BINGAMAN, Ms. LANDRIEU, Mr. LIEBERMAN, Mrs. CLINTON, Mr. MILLER, and Mr. GRAHAM of Florida) introduced the following bill; which was read twice and referred to the Committee on Finance

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## A BILL

To amend title XIX of the Social Security Act to revise and simplify the transitional medical assistance (TMA) program.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Transitional Medical  
5       Assistance Improvement Act of 2003”.

1 **SEC. 2. REVISION AND SIMPLIFICATION OF THE TRANSI-**  
 2 **TIONAL MEDICAL ASSISTANCE PROGRAM**  
 3 **(TMA).**

4 (a) OPTION OF CONTINUOUS ELIGIBILITY FOR 12  
 5 MONTHS; OPTION OF CONTINUING COVERAGE FOR UP TO  
 6 AN ADDITIONAL YEAR.—

7 (1) OPTION OF CONTINUOUS ELIGIBILITY FOR  
 8 12 MONTHS BY MAKING REPORTING REQUIREMENTS  
 9 OPTIONAL.—Section 1925(b) of the Social Security  
 10 Act (42 U.S.C. 1396r–6(b)) is amended—

11 (A) in paragraph (1), by inserting “, at the  
 12 option of a State,” after “and which”;

13 (B) in paragraph (2)(A), by inserting  
 14 “Subject to subparagraph (C):” after “(A) NO-

15 TICES.—”;

16 (C) in paragraph (2)(B), by inserting  
 17 “Subject to subparagraph (C):” after “(B) RE-

18 PORTING REQUIREMENTS.—”;

19 (D) by adding at the end the following new  
 20 subparagraph:

21 “(C) STATE OPTION TO WAIVE NOTICE  
 22 AND REPORTING REQUIREMENTS.—A State  
 23 may waive some or all of the reporting require-  
 24 ments under clauses (i) and (ii) of subpara-  
 25 graph (B). Insofar as it waives such a reporting  
 26 requirement, the State need not provide for a

1 notice under subparagraph (A) relating to such  
2 requirement.”; and

3 (E) in paragraph (3)(A)(iii), by inserting  
4 “the State has not waived under paragraph  
5 (2)(C) the reporting requirement with respect  
6 to such month under paragraph (2)(B) and if”  
7 after “6-month period if”.

8 (2) STATE OPTION TO EXTEND ELIGIBILITY  
9 FOR LOW-INCOME INDIVIDUALS FOR UP TO 12 ADDI-  
10 TIONAL MONTHS.—Section 1925 of such Act (42  
11 U.S.C. 1396r-6) is further amended—

12 (A) by redesignating subsections (c)  
13 through (f) as subsections (d) through (g), re-  
14 spectively; and

15 (B) by inserting after subsection (b) the  
16 following new subsection:

17 “(c) STATE OPTION OF UP TO 12 MONTHS OF ADDI-  
18 TIONAL ELIGIBILITY.—

19 “(1) IN GENERAL.—Notwithstanding any other  
20 provision of this title, each State plan approved  
21 under this title may provide, at the option of the  
22 State, that the State shall offer to each family which  
23 received assistance during the entire 6-month period  
24 under subsection (b) and which meets the applicable  
25 requirement of paragraph (2), in the last month of

1 the period the option of extending coverage under  
 2 this subsection for the succeeding period not to ex-  
 3 ceed 12 months.

4 “(2) INCOME RESTRICTION.—The option under  
 5 paragraph (1) shall not be made available to a fam-  
 6 ily for a succeeding period unless the State deter-  
 7 mines that the family’s average gross monthly earn-  
 8 ings (less such costs for such child care as is nec-  
 9 essary for the employment of the caretaker relative)  
 10 as of the end of the 6-month period under sub-  
 11 section (b) does not exceed 185 percent of the offi-  
 12 cial poverty line (as defined by the Office of Man-  
 13 agement and Budget, and revised annually in ac-  
 14 cordance with section 673(2) of the Omnibus Budget  
 15 Reconciliation Act of 1981) applicable to a family of  
 16 the size involved.

17 “(3) APPLICATION OF EXTENSION RULES.—  
 18 The provisions of paragraphs (2), (3), (4), and (5)  
 19 of subsection (b) shall apply to the extension pro-  
 20 vided under this subsection in the same manner as  
 21 they apply to the extension provided under sub-  
 22 section (b)(1), except that for purposes of this sub-  
 23 section—

24 “(A) any reference to a 6-month period  
 25 under subsection (b)(1) is deemed a reference

1 to the extension period provided under para-  
 2 graph (1) and any deadlines for any notices or  
 3 reporting and the premium payment periods  
 4 shall be modified to correspond to the appro-  
 5 priate calendar quarters of coverage provided  
 6 under this subsection; and

7 “(B) any reference to a provision of sub-  
 8 section (a) or (b) is deemed a reference to the  
 9 corresponding provision of subsection (b) or of  
 10 this subsection, respectively.”.

11 (b) STATE OPTION TO WAIVE RECEIPT OF MED-  
 12 ICAID FOR 3 OF PREVIOUS 6 MONTHS TO QUALIFY FOR  
 13 TMA.—Section 1925(a)(1) of such Act (42 U.S.C. 1396r-  
 14 6(a)(1)) is amended by adding at the end the following:  
 15 “A State may, at its option, also apply the previous sen-  
 16 tence in the case of a family that was receiving such aid  
 17 for fewer than 3 months, or that had applied for and was  
 18 eligible for such aid for fewer than 3 months, during the  
 19 6 immediately preceding months described in such sen-  
 20 tence.”.

21 (c) ELIMINATION OF SUNSET FOR TMA.—

22 (1) Subsection (g) of section 1925 of such Act  
 23 (42 U.S.C. 1396r-6), as redesignated under sub-  
 24 section (a)(2), is repealed.

1           (2) Section 1902(e)(1) of such Act (42 U.S.C.  
 2       1396a(e)(1)) is amended by striking “(A) Notwith-  
 3       standing” and all that follows through “During such  
 4       period, for” in subparagraph (B) and inserting  
 5       “For”.

6       (d) CMS REPORT ON ENROLLMENT AND PARTICIPA-  
 7       TION RATES UNDER TMA.—Section 1925 of such Act (42  
 8       U.S.C. 1396r–6), as amended by subsections (a)(2)(A)  
 9       and (c)(1), is amended by inserting after subsection (f)  
 10      the following:

11      “(g) ADDITIONAL PROVISIONS.—

12           “(1) COLLECTION AND REPORTING OF PARTICI-  
 13      PATION INFORMATION.—Each State shall—

14           “(A) collect and submit to the Secretary,  
 15           in a format specified by the Secretary, informa-  
 16           tion on average monthly enrollment and average  
 17           monthly participation rates for adults and chil-  
 18           dren under this section; and

19           “(B) make such information publicly avail-  
 20      able.

21      Such information shall be submitted under subpara-  
 22      graph (A) at the same time and frequency in which  
 23      other enrollment information under this title is sub-  
 24      mitted to the Secretary. Using such information, the

1 Secretary shall submit to Congress annual reports  
2 concerning such rates.”.

3 (e) COORDINATION OF WORK.—Section 1925(g) of  
4 such Act (42 U.S.C. 1396r–6(g)), as added by subsection  
5 (d), is amended by adding at the end the following new  
6 paragraph:

7 “(2) COORDINATION WITH ADMINISTRATION  
8 FOR CHILDREN AND FAMILIES.—The Administrator  
9 of the Centers for Medicare & Medicaid Services, in  
10 carrying out this section, shall work with the Assist-  
11 ant Secretary for the Administration for Children  
12 and Families to develop guidance or other technical  
13 assistance for States regarding best practices in  
14 guaranteeing access to transitional medical assist-  
15 ance under this section.”.

16 (f) ELIMINATION OF TMA REQUIREMENT FOR  
17 STATES THAT EXTEND COVERAGE TO CHILDREN AND  
18 PARENTS THROUGH 185 PERCENT OF POVERTY.—

19 (1) IN GENERAL.—Section 1925 of such Act  
20 (42 U.S.C. 1396r–6) is further amended by adding  
21 at the end the following:

22 “(h) PROVISIONS OPTIONAL FOR STATES THAT EX-  
23 TEND COVERAGE TO CHILDREN AND PARENTS THROUGH  
24 185 PERCENT OF POVERTY.—A State may meet (but is  
25 not required to meet) the requirements of subsections (a)

1 and (b) if it provides for medical assistance under section  
 2 1931 to families (including both children and caretaker  
 3 relatives) the average gross monthly earning of which (less  
 4 such costs for such child care as is necessary for the em-  
 5 ployment of a caretaker relative) is at or below a level that  
 6 is at least 185 percent of the official poverty line (as de-  
 7 fined by the Office of Management and Budget, and re-  
 8 vised annually in accordance with section 673(2) of the  
 9 Omnibus Budget Reconciliation Act of 1981) applicable  
 10 to a family of the size involved.”.

11 (2) CONFORMING AMENDMENTS.—Section 1925  
 12 of such Act (42 U.S.C. 1396r–6) is further amend-  
 13 ed, in subsections (a)(1) and (b)(1), by inserting “,  
 14 but subject to subsection (h),” after “Notwith-  
 15 standing any other provision of this title,” each  
 16 place it appears.

17 (g) REQUIREMENT OF NOTICE FOR ALL FAMILIES  
 18 LOSING TANF.—Subsection (a)(2) of section 1925 of  
 19 such Act (42 U.S.C. 1396r–6) is amended by adding at  
 20 the end the following flush sentences:

21 “Each State shall provide, to families whose aid  
 22 under part A or E of title IV has terminated but  
 23 whose eligibility for medical assistance under this  
 24 title continues, written notice of their ongoing eligi-  
 25 bility for such medical assistance. If a State makes



1 a determination that any member of a family whose  
2 aid under part A or E of title IV is being terminated  
3 is also no longer eligible for medical assistance under  
4 this title, the notice of such determination shall be  
5 supplemented by a 1-page notification form describ-  
6 ing the different ways in which individuals and fami-  
7 lies may qualify for such medical assistance and ex-  
8 plaining that individuals and families do not have to  
9 be receiving aid under part A or E of title IV in  
10 order to qualify for such medical assistance. Such  
11 notice shall further be supplemented by information  
12 on how to apply for child health assistance under the  
13 State children's health insurance program under  
14 title XXI and how to apply for medical assistance  
15 under this title.”.

16 (h) EXTENDING USE OF OUTSTATIONED WORKERS  
17 TO ACCEPT APPLICATIONS FOR TRANSITIONAL MEDICAL  
18 ASSISTANCE.—Section 1902(a)(55) of such Act (42  
19 U.S.C. 1396a(a)(55)) is amended by inserting “and under  
20 section 1931” after “(a)(10)(A)(ii)(IX)”.

21 (i) EFFECTIVE DATES.—

22 (1) IN GENERAL.—Except as provided in this  
23 subsection, the amendments made by this section  
24 shall apply to calendar quarters beginning on or  
25 after October 1, 2002.

1           (2) NOTICE.—The amendment made by sub-  
2           section (g) shall take effect 6 months after the date  
3           of enactment of this Act.

4           (3) DELAY PERMITTED FOR STATE PLAN  
5           AMENDMENT.—In the case of a State plan for med-  
6           ical assistance under title XIX of the Social Security  
7           Act which the Secretary of Health and Human Serv-  
8           ices determines requires State legislation (other than  
9           legislation appropriating funds) in order for the plan  
10          to meet the additional requirements imposed by the  
11          amendments made by this section, the State plan  
12          shall not be regarded as failing to comply with the  
13          requirements of such title solely on the basis of its  
14          failure to meet these additional requirements before  
15          the first day of the first calendar quarter beginning  
16          after the close of the first regular session of the  
17          State legislature that begins after the date of enact-  
18          ment of this Act. For purposes of the previous sen-  
19          tence, in the case of a State that has a 2-year legis-  
20          lative session, each year of such session shall be  
21          deemed to be a separate regular session of the State  
22          legislature.

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